FeSS Fever Protocol

The QASC Fever Protocol consists of monitoring the patient’s temperature and the prompt treatment of a temperature 37.5°C or greater in the first 72 hours using the fever algorithm attached.

This protocol was used in conjunction with the other FeSS protocols and the FeSS implementation strategies and not as a stand-alone protocol.
FeSS Fever Protocol

Target temperature:  < 37.5°C

- Record baseline temperature on admission to stroke unit and for the first 72 hours following admission
- Monitor and record temperature every four to six hours
- If temperature ≥ 37.5°C, remove blankets and any heaters
- Administer oral paracetamol 1 gram then re-assess
- If patient nil by mouth administer paracetamol 1 gram via nasogastric tube (NGT), per rectum (PR) or intravenously (IV) (according to hospital policy) then re-assess
- Continue to monitor and record temperature four hourly
- If temperature > 38°C:
  - Inform medical team
  - Consider septic workup (as per hospital/unit policy)
    - Mid Stream Urine sample
    - Blood Cultures
    - Chest X-ray
- Continue to monitor temperature four hourly

Note: Patients clinical condition should always be taken into consideration
FeSS Fever Protocol

ASU admission temperature

< 37.5°C
- Monitor temp Q4-6H

≥ 37.5°C
- Remove blankets/heaters
- Administer paracetemol PO/PR/NGT/IV^ (as per hospital policy)
- Monitor temp Q4H

> 38°C
- Inform medical team & consider septic screen as per hospital/stroke unit protocol
- Monitor temp Q4H

Note: Patients clinical condition should always be taken into consideration

^PO = Per Oral
PR = Per Rectal NGT = nasogastric tube
IV = Intravenous
Q4H = every four hours

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